(Print Name of lobbyist)

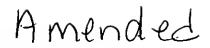
STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s): Debr	a Miller, Julianne McConnell	Tara Reardon		
II. Name of lobbyist's partne	rship, firm or corporation, if a	any:	•	
New Hampshire Con	nmunity Loan Fund			
	nership, firm or corporation)			
7 Wall Street	Concord -	NH	03301	
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
(603) 224-6669	(603) 225-7425		c-mail kdery@communityloanfund.org	
(Telephone)	(Fa:	x)		
	Choose one – file separate repo		may file a separate report for	
reportable expense transaction	ons which are not attributable	to any one client).		
☐ All reportable transactions	occurring in the months prior to	the reporting date relative to	the following client:	
·	,	, ,	•	
(Full N	ame of Client as it appears on the L	obbyist Registration Form)		
OR		,		
	by the lobbyist (including the lo	bbyist's family), or the lobby	ing firm listed below which are	
unrelated to any particular elie	nl. ,			
IV. Date of Report April	25, 2018 🏹	July 25, 2018 🔲	t.	
	tate of registration to 3/31/18	activity from 4/1/18 to 6/30/	18	
	er 31, 2018 🗍	January 30, 2019		
аснуну з	rom 7/1/18 to 9/30/18	activity from 10/1/18 to 12/	31/18	
	s received and no reportable just this form and submit it to t			
VI. Cheek if additional repor	ts are attached:			
· ·	or made expenditures, you must	file Addendum A- Fees and	Expenses	
☐ If you have paid an honora Expense Reimbursement	rium or reimbursed expenses, y	ou must file Addendum B-1	Report of Honorariums or	
•	family has made political contri	butions, you must file Adden	dum C Political Contributions	
			•	
Sworn Statement/Affirmation I have read RSA 15, RSA 15-E and complete to the best of my (Signature of lobbyist)	8, RSA 14-C and RSA 664 and	hereby swear or affirm that th	e foregoing information is true	
Debra Miller				



STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

·	
1. Name of Lobbyist(s) Debra Miller, Julianne McConnell, Tar	a Reardon
II. Name of lobbyist's partnership, firm or corporation, if any:	
New Hampshire Community Loan Fund	
(Name of partnership, firm or corporation)	
III. Name of Client N/A	Date
 IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The gre reduced by any expenses: a) Total of all fees received in this reporting period b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year) 	a) \$
 e) Total of all fees received to date (Add lines a and b) d) Indicate the amount of any such fees that are due, but have not yet been paid 	c) \$ d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office eximidividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbie (e) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/lirm. aggregate total of all expenses paid expenses; (b). the aggregate total of, all let meals purchased during a business as than \$10 that is given to the person of with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25.00 for the of greater than \$25, but not greater than \$50, expense reimbursement, or political
 a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. 	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$0
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from I period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
· · · · · · · · · · · · · · · · · · ·	S
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
Ally Mills (Signature of lobbyist)	7/3/18
	(Dusc)
DEBRA MILLER	

Amended

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

(Print Name of lobbyist)

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for: New Hampshire Community Loan Fund Name of Lobbying partnership, firm, or corporation: Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Date of Report (check one): April 25, 2018 🔯 July 25, 2018 🗆 October 31, 2018 January 30, 2019 · I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): X Addendum A(s). Addendum B(s). Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. Debra Miller

Amended

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

(Print Name of lobbyist)

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for: New Hampshire Community Loan Fund Name of Lobbying partnership, firm, or corporation: Name of Client (leave blank if Statement is for the partnership, firm, or eorporation and not related to any particular client): Date of Report (check one): April 25, 2018 🔯 July 25, 2018 · October 31, 2018 January 30, 2019 I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): X Addendum A(s). Addendum B(s). Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. Julianne McConnell

Amended

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

(Print Name of lobbyist)

	ffirmation by Lobb; ie and Expenses for:				
Name of Lobbying pa	rtnership, firm, or corpo	nation: New Hampshire	e Community Loan Fund		
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):					
Date of Report (check	one):				
April 25, 2018 💆	July 25, 2018 🗆	October 31, 2018	January 30, 2019 🗆		
			nd Expenses described above, and umber of Addendum forms being		
X Addendum A(s). ·				
Addendum B(s).				
Addendum C(s).		•		
-	f my knowledge and be		nt and each Addendum is true and		
Tara Reardon					